



**Illinois Pre existing Condition Insurance Plan (IPXP)  
PREMIUM RATE TABLE INSTRUCTIONS**

This Rate Table Booklet contains all rate tables applicable to enrollees in the IPXP. Information and premium rates contained herein are established pursuant to applicable federal law and may be changed.

The following premium rates for the IPXP were calculated in compliance with Federal requirements, including:

- Premium rates for the IPXP must not exceed 100% of the standard risk rate in Illinois. This means that the premiums charged by the IPXP must be equal to or less than those charged for similar coverage in Illinois.
- Premium rates for the IPXP may vary on the basis of age by a factor of not more than 4:1. As a result, the oldest enrollees in the IPXP may be charged no more than 4 times what the youngest enrollees are charged.
- Male and female enrollees in the IPXP must be charged the same rate.
- IPXP premiums may vary based on location within Illinois.
- IPXP premiums may vary based on an enrollee's use of tobacco, but tobacco users may not be charged more than twice the premium for non-tobacco users.

These requirements differ from the state laws which regulate the calculation of ICHIP premiums in the following ways:

- ICHIP premiums, by state law, may not be less than 125% of the standard risk rate in Illinois. This means that ICHIP enrollees, by law, must pay at least 25% more than the charge for similar coverage in Illinois.
- ICHIP must, by state law, set different premiums for men and women.
- ICHIP must, by state law, vary the premiums charged based on the age of the enrollee.

Due to these differences between the Federal law which establishes guidelines for the IPXP program, and the Illinois law which establishes guidelines for the ICHIP program, ICHIP premiums may be higher than IPXP premiums.

**FOLLOW THESE EASY STEPS TO DETERMINE YOUR RATES:**

1. Locate the appropriate rate table based on your rate area. Your Rate Area is the county in which you live and physically reside on a permanent and full-time basis (see Rate Areas, below).
2. Choose either the non-tobacco user rate or the tobacco user rate. Tobacco use is defined as the use of any form of tobacco products, including, but not limited to, cigarettes, pipes, cigars, cigarillos, snuff, snus, and chewing tobacco products.
3. Find the proper age bracket for each person enrolling.
4. Within the correct category, determine the premium. This is your monthly premium.

**Rate Areas**

AREA	COUNTIES
A	County of Cook, City of Chicago only.
B	All of Cook County, except the City of Chicago, and all of DuPage, Kane, Lake, McHenry and Will Counties.
C	All of Boone, Champaign, DeKalb, Grundy, Kankakee, Kendall, Madison, Peoria, Rock Island, Sangamon, St. Clair, Tazewell, and Winnebago Counties.
D	All counties not included in A, B, or C above.

If you have questions about your rates, please contact the Plan Administrator:

Health Alliance Medical Plans  
301 S Vine Street Attn: IPXP  
Urbana, IL 61801  
Voice 877-210-9167  
TTY/TDD 866-883-8551

Or visit our website at: <http://insurance.illinois.gov/ipxp/>

# \$1,000 Deductible FHRP Monthly Unisex Rates Effective 1/1/11

Age	Area A			Area B	
	Tobacco	Non-Tobacco		Tobacco	Non-Tobacco
0-18	\$190	\$152		\$171	\$138
19-34	\$214	\$172		\$193	\$155
35	\$276	\$222		\$250	\$200
36	\$284	\$228		\$257	\$206
37	\$293	\$235		\$264	\$212
38	\$305	\$245		\$275	\$221
39	\$317	\$255		\$286	\$230
40	\$330	\$265		\$298	\$239
41	\$343	\$276		\$310	\$249
42	\$357	\$287		\$322	\$259
43	\$371	\$299		\$335	\$270
44	\$386	\$311		\$349	\$281
45	\$401	\$323		\$363	\$292
46	\$418	\$336		\$377	\$304
47	\$434	\$349		\$392	\$316
48	\$451	\$363		\$407	\$328
49	\$468	\$376		\$422	\$340
50	\$485	\$391		\$438	\$353
51	\$504	\$405		\$455	\$366
52	\$523	\$421		\$472	\$380
53	\$543	\$437		\$490	\$395
54	\$564	\$454		\$509	\$410
55	\$586	\$471		\$529	\$425
56	\$608	\$489		\$549	\$442
57	\$632	\$508		\$571	\$459
58	\$655	\$526		\$591	\$476
59	\$678	\$545		\$613	\$493
60+	\$755	\$607		\$682	\$548

## **Rate Area A --**

The City of Chicago, Cook County only.

## **Rate Area B --**

all of Cook County (except the City of Chicago) and all of DuPage, Kane, Lake, McHenry and Will counties.

# \$1,000 Deductible FHRP Monthly Unisex Rates Effective 1/1/11

Age	Area C			Area D	
	Tobacco	Non-Tobacco		Tobacco	Non-Tobacco
0-18	\$145	\$117		\$142	\$114
19-34	\$164	\$132		\$160	\$128
35	\$212	\$170		\$206	\$166
36	\$218	\$175		\$212	\$171
37	\$224	\$180		\$219	\$176
38	\$234	\$188		\$227	\$183
39	\$243	\$195		\$237	\$190
40	\$253	\$203		\$246	\$198
41	\$263	\$212		\$256	\$206
42	\$274	\$220		\$267	\$215
43	\$285	\$229		\$277	\$223
44	\$296	\$238		\$288	\$232
45	\$308	\$248		\$300	\$241
46	\$320	\$258		\$312	\$251
47	\$333	\$268		\$324	\$261
48	\$346	\$278		\$337	\$271
49	\$359	\$289		\$349	\$281
50	\$372	\$300		\$363	\$292
51	\$386	\$311		\$376	\$303
52	\$401	\$323		\$390	\$314
53	\$416	\$335		\$406	\$326
54	\$432	\$348		\$421	\$339
55	\$449	\$361		\$438	\$352
56	\$467	\$375		\$454	\$365
57	\$485	\$390		\$472	\$379
58	\$502	\$404		\$489	\$393
59	\$520	\$418		\$507	\$408
60+	\$579	\$466		\$564	\$454

## **Rate Area C --**

Boone, Champaign, DeKalb, Grundy, Kankakee, Kendall, Madison, Peoria, Rock Island, Sangamon, St. Clair, Tazewell and Winnebago Counties.

## **Rate Area D --**

all counties not included in Area A, B, or C